## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINIOS

## CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Lydia S. Meyer, Chapter 13 Trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C § 1302(b)(1). The Trustee declares as follows:

- 1) The case was filed on 01/02/2018.
- 2) The plan was confirmed on NA.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C § 1329 on NA.
- 4) The Trustee filed action to remedy default by the debtor(s) in performance under the plan on NA.
- 5) The case was dismissed on 04/26/2018.
- 6) Number of months from filing or conversion to last payment:  $\underline{3}$ .
- 7) Number of months case was pending: 6.
- 8) Total value of assets abandoned by court order: NA.
- 9) Total value of assets exempted: <u>\$0.00</u>.
- 10) Amount of unsecured claims discharged without full payment: \$0.00.
- 11) All checks distributed by the Trustee relating to this case have cleared the bank.

| Receipts:                                   |             |             |  |
|---|-------------|-------------|--|
| Total paid by or on behalf of the debtor(s) | \$ 2,625.00 |             |  |
| Less amount refunded to debtor(s)           | \$ 0.00     |             |  |
| NET RECEIPTS                                |             | \$ 2,625.00 |  |
|   |             |             |  |

|             | \$ 2,023.00                     |   |
|-------------|---------------------------------|---|
|             |                                 |   |
|             |                                 |   |
| \$ 1,743.75 |                                 |   |
| \$ 0.00     |                                 |   |
| \$ 236.25   |                                 |   |
| \$ 0.00     |                                 |   |
|             | \$ 1,980.00                     |   |
| \$ 100.00   |                                 |   |
|             | \$ 0.00<br>\$ 236.25<br>\$ 0.00 | \$ 1,743.75<br>\$ 0.00<br>\$ 236.25<br>\$ 0.00<br>\$ 1,980.00 |

| Scheduled Creditors:         |       |           |                 |           |             |             |
|------------------------------|-------|-----------|-----------------|-----------|-------------|-------------|
| Creditor                     |       | Claim     | Claim           | Claim     | Principal   | Interest    |
| <u>Name</u>                  | Class | Scheduled | <b>Asserted</b> | Allowed   | <u>Paid</u> | <u>Paid</u> |
| GERACI LAW L.L.C.            | Lgl   | 4,000.00  | 2,500.00        | 1,743.75  | 1,743.75    | 0.00        |
| ALPINE BANK & TRUST          | Sec   | 0.00      | 94,266.73       | 0.00      | 0.00        | 0.00        |
| MEMBERSALLIANCE CREDIT       | Sec   | 5,325.00  | 8,875.00        | 5,325.00  | 0.00        | 159.00      |
| MEMBERSALLIANCE CREDIT       | Uns   | 5,343.00  | 4,978.09        | 8,528.09  | 0.00        | 0.00        |
| MEMBERS ALLIANCE CU          | Uns   | 13,294.00 | NA              | NA        | 0.00        | 0.00        |
| MEMBERSALLIANCE CREDIT       | Sec   | 16,220.00 | 16,328.11       | 16,328.11 | 0.00        | 486.00      |
| MEMBERSALLIANCE CREDIT       | Sec   | 1,555.00  | 3,296.89        | 1,555.00  | 0.00        | 0.00        |
| MEMBERSALLIANCE CREDIT       | Uns   | 11,739.00 | 10,910.66       | 12,652.55 | 0.00        | 0.00        |
| BEST BUY                     | Uns   | 483.00    | NA              | NA        | 0.00        | 0.00        |
| CBNA                         | Uns   | 81.00     | NA              | NA        | 0.00        | 0.00        |
| CBNA                         | Uns   | 802.00    | NA              | NA        | 0.00        | 0.00        |
| RESURGENT CAPITAL SERVICES   | Uns   | 5,334.00  | 5,369.51        | 5,369.51  | 0.00        | 0.00        |
| HOME DEPOT CREDIT SVC /      | Uns   | 358.00    | NA              | NA        | 0.00        | 0.00        |
| MAURICES                     | Uns   | 110.00    | NA              | NA        | 0.00        | 0.00        |
| ROCKFORD ASSOCIATED CLINICAI | Uns   | 550.00    | NA              | NA        | 0.00        | 0.00        |
| ROCKFORD HEALTH PHYSICIANS   | Uns   | 295.00    | NA              | NA        | 0.00        | 0.00        |
| STATE COLLECTION SERVICE INC | Uns   | 0.00      | NA              | NA        | 0.00        | 0.00        |
| SWEDISH AMERICAN HOSPITAL    | Uns   | 2,500.00  | 2,686.09        | 2,686.09  | 0.00        | 0.00        |

| Scheduled Creditors:     |              |           |                 |                |             |             |
|--------------------------|--------------|-----------|-----------------|----------------|-------------|-------------|
| Creditor                 |              | Claim     | Claim           | Claim          | Principal   | Interest    |
| <u>Name</u>              | <u>Class</u> | Scheduled | <u>Asserted</u> | <u>Allowed</u> | <u>Paid</u> | <u>Paid</u> |
| SYNCB / ASHLEY HOMESTORE | Uns          | 750.00    | NA              | NA             | 0.00        | 0.00        |
| VERIZON BY AMERICAN      | Uns          | 0.00      | 1,409.87        | 1,409.87       | 0.00        | 0.00        |
| RAYMOND MOEN             | Uns          | 14,000.00 | NA              | NA             | 0.00        | 0.00        |
| ADVANTAGE CHIROPRACTIC   | Uns          | 479.99    | NA              | NA             | 0.00        | 0.00        |

| Summary of Disbursements to Creditors: |                  |                   |                  |
|--|------------------|-------------------|------------------|
|  | Claim<br>Allowed | Principal<br>Paid | Interest<br>Paid |
| Secured Payments:                      |                  |                   |                  |
| Mortgage Ongoing                       | \$ 0.00          | \$ 0.00           | \$ 0.00          |
| Mortgage Arrearage                     | \$ 0.00          | \$ 0.00           | \$ 0.00          |
| Debt Secured by Vehicle                | \$ 23,208.11     | \$ 0.00           | \$ 645.00        |
| All Other Secured                      | \$ 0.00          | \$ 0.00           | \$ 0.00          |
| TOTAL SECURED:                         | \$ 23,208.11     | \$ 0.00           | \$ 645.00        |
| Priority Unsecured Payments:           |                  |                   |                  |
| Domestic Support Arrearage             | \$ 0.00          | \$ 0.00           | \$ 0.00          |
| Domestic Support Ongoing               | \$ 0.00          | \$ 0.00           | \$ 0.00          |
| All Other Priority                     | \$ 0.00          | \$ 0.00           | \$ 0.00          |
| TOTAL PRIORITY:                        | \$ 0.00          | \$ 0.00           | \$ 0.00          |
| GENERAL UNSECURED PAYMENTS:            | \$ 30,646.11     | \$ 0.00           | \$ 0.00          |

| Disbursements:  |                          |             |  |
|---|--------------------------|-------------|--|
| Expenses of Administration Disbursements to Creditors | \$ 1,980.00<br>\$ 645.00 |             |  |
| TOTAL DISBURSEMENTS:                                  |                          | \$ 2,625.00 |  |

12) The Trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the Trustee is responsible have been completed. The Trustee requests a final decree be entered that discharges the Trustee and grants such other relief as may be just and proper.

Date: <u>07/18/2018</u> By: <u>/s/ Lydia S. Meyer</u> Trustee

**STATEMENT:** This Uniform Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.